Sc	Chedule E) PAGE 1 OF 33 FOR SE OF FORM 24/48						
	NAME OF COMMITTEE (In Full)						
IN	NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C C00075820						
					M = M / D = D / Y = Y = Y		
Ch		ew rep	ort Amends repo	ort filed			
	Full Name of Payee NATIONAL MEDIA RESEARCH PLANNING	& PL	ACEMENT LLC		Date of Public Distribution/Dissemination		
	Mailing Address 815 SLATERS LANE				10 07 2014		
					Amount		
	City State		Zip Code		573718.37		
	ALEXANDRIA VA		22314		Transaction ID : SE24-0.042688 Date of Disbursement or Obligation		
	Purpose of Expenditure MEDIA		Category/ Type		10 03 2014		
	Name of Federal Candidate		Support	Office	e Sought: X House District: 01		
	ANN KIRKPATRICK		Oppose		President Senate State: AZ		
	Calendar Year-To-Date Per Election for Office Sought	25	503543.63	Disbu 2014	ursement For: Primary		
	Full Name of Payee ONMESSAGE INC				Date of Public Distribution/Dissemination		
	Moiling Address				10 07 2014		
	Mailing Address 705 MELVIN DR				Amount		
	STE 105 City State		Zip Code		18860.00		
	ANNAPOLIS MD		21401		Transaction ID : SE24-0.042881 Date of Disbursement or Obligation		
	Purpose of Expenditure MEDIA		Category/ Type		10 07 / 2014		
	Name of Federal Candidate		Support	Office	e Sought: X House District: 01		
	ANN KIRKPATRICK		X Oppose		President Senate State: AZ		
	Calendar Year-To-Date Per Election for Office Sought	,	2503543.63	Disbu 2014	ursement For: Primary		
				•			
	(a) SUBTOTAL of Itemized Independent Expenditures			▶	592578.37		
(b) SUBTOTAL of Unitemized Independent Expenditures							
	(c) TOTAL Independent Expenditures			•	1171171171		
	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
	Keith A. Davis	Electron	ically Filed] Date	M 1	0 07 2014		
	Signature		Date	, L	2014		

PAGE 33 OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C00075820 New report Check if 24-hour report X 48-hour report Amends report filed on Full Name of Payee Date of Public Distribution/Dissemination GS STRATEGY GROUP 2014 10 07 Mailing Address 350 N 9TH ST Amount SUITE 550 City State Zip Code 21215.00 BOISE ID 83702 Transaction ID: SE24-0.042899 Date of Disbursement or Obligation Purpose of Expenditure Category/ SURVEY RESEARCH 10 07 2014 Type Name of Federal Candidate X House 01 Office Sought: District: Support ANN KIRKPATRICK ΑZ Oppose President Senate State: Disbursement For: Primary X General Calendar Year-To-Date 2503543.63 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC 2014 Mailing Address 815 SLATERS LANE Amount Zip Code City State 103554.72 **ALEXANDRIA** VA Transaction ID: SE24-0.042684 22314 Date of Disbursement or Obligation Purpose of Expenditure Category/ MEDIA 03 2014 10 Type Name of Federal Candidate 02 Support Office Sought: X House District: **RONALD BARBER** ΑZ Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 1648266.35 2014 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 124769.72 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Keith A. Davis [Electronically Filed] 10 07 2014 Date Signature

chedule E) PAGE 3 OF 33 FOR SE OF FORM 24/48					
AME OF COMMITTEE (In Full) IATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C C00075820					
	G 500073025				
Check if 24-hour report X 48-hour report New report Ar	mends report filed on				
Full Name of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEME	Date of Public Distribution/Dissemination Date of Public Distribution/Dissemination 10 07 2014				
Mailing Address 815 SLATERS LANE	Amount				
City State Zip Code	180404.77				
ALEXANDRIA VA 22314	Transaction ID : SE24-0.042701 Date of Disbursement or Obligation				
Purpose of Expenditure MEDIA Category, Type					
Name of Federal Candidate	Support Office Sought: X House District: 02				
RONALD BARBER	Oppose President Senate State: AZ				
Calendar Year-To-Date Per Election for Office Sought 1648266.35	Disbursement For: Primary General 2014 Other (specify) ▶				
Full Name of Payee FP1 STRATEGIES LLC	Date of Public Distribution/Dissemination				
	10 07 7 2014				
Mailing Address PO BOX 16504	Amount				
City State Zip Code	24102.00				
ALEXANDRIA VA 22302	Transaction ID : SE24-0.042890 Date of Disbursement or Obligation				
Purpose of Expenditure MEDIA Category, Type					
Name of Federal Candidate	Support Office Sought: X House District: 02				
RONALD BARBER	Oppose President Senate State: AZ				
Calendar Year-To-Date Per Election for Office Sought 1648266.	Disbursement For: Primary General 2014 Other (specify) ▶				
(a) SUBTOTAL of Itemized Independent Expenditures					
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Keith A. Davis [Electronically Filed] Signature	Date 10 07 2014				
Oignature					

Schedule E)				FOR SE OF FORM 24/48	
AME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼					
NATIONAL REPUBLICAN CO	NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE				
		C C00075820			
Check if 24-hour report X 48-hour	report New repo	ort Amends repo		= M / D = D / Y = Y = Y	
Full Name of Payee			Date of	of Public Distribution/Dissemination	
AMY LEEDECKE			ГМ	10 07 2014	
Mailing Address 110 D STREET SE				10 07 2014	
APT 515			Amou	nt	
City	State	Zip Code	- [1500.00	
WASHINGTON	DC	20003		action ID : SE24-0.042925 of Disbursement or Obligation	
Purpose of Expenditure SURVEY RESEARCH		Category/ Type	М	10 07 7 2014	
Name of Federal Candidate		Support	Office Sough	t: X House District: 02	
RONALD BARBER		X Oppose	Preside	ent Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought	16	648266.35	Disbursemen 2014		
Full Name of Davis				ther (specify)	
Full Name of Payee NATIONAL MEDIA RESEAR	CH PLANNING & PL	ACEMENT LLC		of Public Distribution/Dissemination	
Mailing Address 815 SLATERS LANE				10 07 2014	
			Amou	nt	
City	State	Zip Code	-	285492.13	
ALEXANDRIA	VA	22314		oction ID : SE24-0.042689 of Disbursement or Obligation	
Purpose of Expenditure MEDIA		Category/ Type	N/	10 / 03 / 2014	
Name of Federal Candidate		Support	Office Sough	it: X House District: 07	
AMERISH BERA		X Oppose	Preside	ent Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought		1290073.96	Disbursemen 2014		
Tot Election for Cities Cought			0	ther (specify) ►	
(a) SUBTOTAL of Itemized Independent	Expenditures			286992.13	
				7 7 7	
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures					
				7 7 7	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Keith A. Davis	[Electron	ically Filed] Date	M M /	07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature	-			لىنىا لىا	

chedule E) PAGE 5 OF 33 FOR SE OF FORM 24/48					
ME OF COMMITTEE (In Full) IATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C C00075820					
				G 000073020	
Check if 24-hour report X 48-hour report	New rep	ort Amends repo	rt filed on	D D / Y Y Y Y Y	
Full Name of Payee NATIONAL MEDIA RESEARCH PLAN	INING & PL	ACEMENT LLC		of Public Distribution/Dissemination	
Mailing Address 815 SLATERS LANE			Amou		
City	State	Zip Code		250399.67	
ALEXANDRIA	VA	22314		saction ID : SE24-0.042773 of Disbursement or Obligation	
Purpose of Expenditure MEDIA		Category/ Type		10 06 / Y Y Y Y Y Y	
Name of Federal Candidate		Support	Office Sough	nt: X House District: 07	
AMERISH BERA		Oppose	Preside		
Calendar Year-To-Date Per Election for Office Sought	12	290073.96	Disbursemen 2014 O	nt For:	
Full Name of Payee SOMETHING ELSE STRATEGIES			Date	of Public Distribution/Dissemination	
				10 07 2014	
Mailing Address 212 GOLDEN WILLOW CT			Amou	ınt	
City	State	Zip Code		22600.00	
EASLEY	SC	29642		action ID : SE24-0.042883 of Disbursement or Obligation	
Purpose of Expenditure MEDIA		Category/ Type		10 07 / 2014	
Name of Federal Candidate		Support	Office Sough	nt: X House District:07	
AMERISH BERA		Oppose	Presid	ent Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought	, ,	1290073.96	Disbursemer 2014	nt For:	
(a) SUBTOTAL of Itemized Independent Expenditures	,			272999.67	
(a) SOBIOTAL OF REMIZED INDEPENDENT EXPENDITURES.	······			212333.01	
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Keith A. Davis Signature	[Electron	ically Filed] Date	10	07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	

FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C00075820 Check if X 48-hour report 24-hour report X New report Amends report filed on Full Name of Payee Date of Public Distribution/Dissemination AMY LEEDECKE 2014 10 07 Mailing Address 110 D STREET SE Amount **APT 515** State Zip Code 1500.00 City DC 20003 Transaction ID: SE24-0.042927 WASHINGTON Date of Disbursement or Obligation Purpose of Expenditure Category/ SURVEY RESEARCH 10 07 2014 Type Name of Federal Candidate X House 07 Office Sought: District: Support AMERISH BERA CA Oppose President Senate State: Disbursement For: Primary X General Calendar Year-To-Date 1290073.96 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC 2014 Mailing Address 815 SLATERS LANE Amount Zip Code 326547.92 City State **ALEXANDRIA** VA Transaction ID: SE24-0.042690 22314 Date of Disbursement or Obligation Purpose of Expenditure Category/ MEDIA 03 2014 10 Type Name of Federal Candidate 52 Support Office Sought: X House District: SCOTT PETERS CA Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 1628046.96 2014 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 328047.92 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Keith A. Davis [Electronically Filed] 10 07 2014 Date Signature

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	ME OF COMMITTEE (In Full) IATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼				
IN	IATIONAL REPUBLICAN CONGRESSIONAL COMMINITTEE	C C00075820				
Ch	eck if 24-hour report X 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y				
	Full Name of Payee	Date of Public Distribution/Dissemination				
	DMM MEDIA INC	10 06 2014				
	Mailing Address 1911 N FORT MYER DR	Amount				
	STE 400	00.400.50				
	City State Zip Code ARLINGTON VA 22209	22422.50 Transaction ID : SE24-0.042754 Date of Disbursement or Obligation				
	Purpose of Expenditure MEDIA Category/ Type	10 06 7 2014				
	Name of Federal Candidate Support Office	Sought: X House District: 52				
	SCOTT PETERS Oppose	President Senate State: CA				
	diction to bate	rrsement For: Primary X General				
	Per Election for Office Sought 1628046.96 2014	Other (specify) ▶				
	Full Name of Payee DMM MEDIA INC	Date of Public Distribution/Dissemination				
	Mailing Address 1911 N FORT MYER DR	10 06 2014				
	STE 400	Amount				
	City State Zip Code	5000.00				
	ARLINGTON VA 22209	Transaction ID : SE24-0.042755 Date of Disbursement or Obligation				
	Purpose of Expenditure MEDIA Category/ Type	10 D D D Z014				
	Name of Federal Candidate Support Office	e Sought: X House District: 52				
	SCOTT PETERS Oppose	President Senate State: CA				
	Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For: Primary				
_						
	(a) SUBTOTAL of Itemized Independent Expenditures	27422.50				
	(b) SUBTOTAL of Unitemized Independent Expenditures					
	(c) TOTAL Independent Expenditures					
	•	7 7 7				
	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
	[E1 - 4 : II - E1 - 1]	M / D D / Y Y Y Y Y				
	Signature Date 1	0 07 2014				

PAGE 7

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Signature

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4/48 HOUR REPORT OF INDEPENDENT EXPENDITURES					
Schedule E)		PAGE 8 OF 33 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL C		FEC IDENTIFICATION NUMBER ▼			
NATIONAL REPUBLICAN CONGILESSICINAL C	Olviivii i i i i i i i i i i i i i i i i	C C00075820			
Check if 24-hour report X 48-hour report New report	ort Amends report fi	iled on O O O O O O O O O O O O O O O O O O			
Full Name of Payee IMGE		Date of Public Distribution/Dissemination			
Mailing Address 603 KING ST		10 07 2014			
4TH FLR		Amount			
	Zip Code	101700.00			
ALEXANDRIA VA	22314	Transaction ID : SE24-0.042774 Date of Disbursement or Obligation			
Purpose of Expenditure MEDIA	Category/ Type	10 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate	Support Of	ffice Sought: X House District: 52			
SCOTT PETERS	Oppose [President Senate State: CA			
Calendar Year-To-Date Per Election for Office Sought		isbursement For: Primary			
Full Name of Payee		Date of Public Distribution/Dissemination			
GS STRATEGY GROUP		10 06 / Y Y Y Y Y			
Mailing Address 350 N 9TH ST		Amount			
SUITE 550		7			
	Zip Code	15000.00			
BOISE ID	83702	Transaction ID: SE24-0.042897 Date of Disbursement or Obligation			
Purpose of Expenditure SURVEY RESEARCH	Category/ Type	10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate	Support Of	office Sought: X House District: 52			
SCOTT PETERS	∑ Oppose [President Senate State: CA			
Calendar Year-To-Date Per Election for Office Sought		olsbursement For: ☐ Primary ☐ General Ol4 ☐ Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures		116700.00			
(b) SUBTOTAL of Unitemized Independent Expenditures	·····				
(c) TOTAL Independent Expenditures	······				
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.					
Keith A. Davis [Electroni	ically Filed] Date	10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			

10

Date

chedule E) PAGE 9 OF 33 FOR SE OF FORM 24/48					
ME OF COMMITTEE (In Full) IATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE FEC IDENTIFICATION NUMBER ▼					
	C C00075820				
Check if 24-hour report X 48-hour report New report Amends report file	d on				
Full Name of Payee	Date of Public Distribution/Dissemination				
AMY LEEDECKE	10 06 7 2014				
Mailing Address 110 D STREET SE	Amount				
APT 515 City State Zip Code	1500.00				
WASHINGTON DC 20003	Transaction ID : SE24-0.042928 Date of Disbursement or Obligation				
Purpose of Expenditure SURVEY RESEARCH Category/ Type	10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Federal Candidate Support Office	ce Sought: X House District: 52				
SCOTT PETERS Oppose	President Senate State: CA				
Calendar Year-To-Date Per Election for Office Sought Dist 2014	oursement For: Primary				
Full Name of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC	Date of Public Distribution/Dissemination				
	10 07 2014				
Mailing Address 815 SLATERS LANE	Amount				
City State Zip Code	694876.63				
ALEXANDRIA VA 22314	Transaction ID : SE24-0.042678 Date of Disbursement or Obligation				
Purpose of Expenditure MEDIA Category/ Type	10 / D D / Y Y Y Y Y Y Y				
Name of Federal Candidate Support Office	ce Sought: X House District: 06				
ANDREW ROMANOFF Oppose	President Senate State: CO				
Calendar Year-To-Date Per Election for Office Sought Dist 2337975.80	oursement For:				
(a) SUBTOTAL of Itemized Independent Expenditures	696376.63				
(a) SUBTOTAL OF REITIZED HIDEPENDENT EXPENDITURES	090370.03				
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
[Electronically Filed] Date	10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Signature					

FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C00075820 X 48-hour report 24-hour report X New report Amends report filed on Check if Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC 2014 10 07 Mailing Address 815 SLATERS LANE Amount State Zip Code 351125.00 City VA 22314 Transaction ID: SE24-0.042784 **ALEXANDRIA** Date of Disbursement or Obligation Purpose of Expenditure Category/ **MEDIA** 10 06 2014 Type Name of Federal Candidate X House 06 Office Sought: District: Support ANDREW ROMANOFF CO Oppose President Senate State: Disbursement For: Primary X General Calendar Year-To-Date 2337975.80 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination AMY LEEDECKE 2014 Mailing Address 110 D STREET SE Amount **APT 515** City State Zip Code 1500.00 WASHINGTON DC Transaction ID: SE24-0.042926 20003 Date of Disbursement or Obligation Purpose of Expenditure Category/ SURVEY RESEARCH 07 2014 10 Type Name of Federal Candidate 06 Support Office Sought: X House District: ANDREW ROMANOFF CO Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 2337975.80 2014 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 352625.00 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Keith A. Davis [Electronically Filed] 10 07 2014 Date Signature

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PAGE 33 11 OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C00075820 X 48-hour report X New report 24-hour report Amends report filed on Check if Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC 2014 10 07 Mailing Address 815 SLATERS LANE Amount State Zip Code 101942.97 City Transaction ID: SE24-0.042904 VA 22314 **ALEXANDRIA** Date of Disbursement or Obligation Purpose of Expenditure Category/ **MEDIA** 10 03 2014 Type Name of Federal Candidate X House 02 X Support Office Sought: District: WILLIAM STEVE SOUTHERLAND FL Oppose President Senate State: Disbursement For: Primary X General Calendar Year-To-Date 1450620.87 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC 2014 Mailing Address 815 SLATERS LANE Amount City State Zip Code 74691.56 **ALEXANDRIA** VA 22314 Transaction ID: SE24-0.042905 Date of Disbursement or Obligation Purpose of Expenditure Category/ MEDIA 03 2014 10 Type Name of Federal Candidate 02 Support Office Sought: X House District: **GWEN GRAHAM** FL Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 1450620.87 2014 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 176634.53 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Keith A. Davis [Electronically Filed] 10 07 2014 Date Signature

PAGE 12 OF 33 FOR SE OF FORM 24/48					
AME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C C00075820					
Check if 24-hour report	48-hour report New repo	ort Amends repo	M M / D D / Y Y Y		
	SEARCH PLANNING & PL	ACEMENT LLC	Date of Public Distribution/Disseminat	YY	
Mailing Address 815 SLATERS	LANE		Amount		
City ALEXANDRIA	State VA	Zip Code 22314	74691 Transaction ID : SE24-0.042906	1.56	
Purpose of Expenditure MEDIA		Category/ Type	Date of Disbursement or Obligation		
Name of Federal Candidate WILLIAM STEVE SOUTHERLAN	ND	Support Oppose	Tiodoc Biotriot	02 FL	
Calendar Year-To-Date Per Election for Office Souç	ght 14	150620.87	Disbursement For: ☐ Primary ☐ Ge 2014 ☐ Other (specify) ▶	eneral	
Full Name of Payee NATIONAL MEDIA RES Mailing Address 815 SLATER	SEARCH PLANNING & PL	ACEMENT LLC	Date of Public Distribution/Disseminal 10 07 2014 Amount	Y Y	
City	State VA	Zip Code	101942.9 Transaction ID : SE24-0.042907	96	
Purpose of Expenditure MEDIA		Category/ Type	Date of Disbursement or Obligation		
Name of Federal Candidate GWEN GRAHAM		Support Oppose	President State.	02 FL	
Calendar Year-To-Date Per Election for Office Sou	ght	1450620.87	Disbursement For: ☐ Primary ☐ Ge 2014 ☐ Other (specify) ▶	eneral	
(a) SUBTOTAL of Itemized Independent Expenditures					
(b) SUBTOTAL of Unitemized Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Keith A. Davis	[Electron	ically Filed] Date	10 07 2014		
Signature					

Schedu	le E)	76111 671 6115	1101120		PAGE 13 OF 33 FOR SE OF FORM 24/48
	IAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE FEC IDENTIFICATION NUMBER ▼				
14/ (11)	NAL KEI ODLIO, III OO.IO				C C00075820
Check if	24-hour report X 48-hour report	New rep	oort Amends repo	ort filed on	- M / D - D / Y - Y - Y - Y
Full N SR	ame of Payee CP MEDIA INC				of Public Distribution/Dissemination
Mailin	g Address 201 N UNION ST			Amou	
C:tv	STE 200	01-1-	7'- 0-4-		27960 00
City ALEX	(ANDRIA	State VA	Zip Code 22314		27869.00 action ID : SE24-0.042874 of Disbursement or Obligation
Purpo MED	se of Expenditure IA		Category/ Type		10 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name	of Federal Candidate		Support	Office Sough	t: X House District: 02
GWE	N GRAHAM		Support Oppose	Preside	
	Calendar Year-To-Date Per Election for Office Sought	14	450620.87	Disbursemen 2014 O	t For: Primary X General ther (specify) ▶
	lame of Payee CP MEDIA INC			Date	of Public Distribution/Dissemination
Mailin	g Address 201 N UNION ST				10 07 2014
	STE 200			Amou	nt
City ALF)	(ANDRIA	State VA	Zip Code 22314	Transa	24379.00 action ID : SE24-0.042875
	se of Expenditure			Date	of Disbursement or Obligation
MED	•		Category/ Type		10 / 07 / 2014
Name	of Federal Candidate		X Support	Office Sough	it: X House District: 02
WILL	IAM STEVE SOUTHERLAND		Oppose	Preside	ent Senate State: FL
	Calendar Year-To-Date Per Election for Office Sought		1450620.87	Disbursemer 2014 C	t For:
(a) SU	BTOTAL of Itemized Independent Exper	nditures		•	52248.00
(b) SU	BTOTAL of Unitemized Independent Exp	penditures			
• •					45 45
(c) TO	TAL Independent Expenditures			•	7 7 7
with, or	penalty of perjury I certify that the inde at the request or suggestion of, any ca committee) any political party committee	andidate or authorized			
	Keith A. Davis	[Electron	nically Filed] Date	10	07
Sigr	nature				

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IAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE FEC IDENTIFICATION NUMBER ▼					
		00075820			
Check if 24-hour report X 48-hour report	New report Amends report filed on	D = D / Y = Y = Y			
Full Name of Payee THE TARRANCE GROUP		Distribution/Dissemination			
	10	07 / 2014			
Mailing Address 201 N UNION ST STE 410	Amount				
City State	e Zip Code	7148.00			
ALEXANDRIA VA	22314 Transaction ID	: SE24-0.042900 ement or Obligation			
Purpose of Expenditure SURVEY RESEARCH	Category/ Type	07 / 2014			
Name of Federal Candidate	Support Office Sought:	House District: 02			
GWEN GRAHAM	Oppose President	Senate State: FL			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: 2014 Other (spec	Primary			
Full Name of Payee		Distribution/Dissemination			
THE TARRANCE GROUP	M M /	07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 201 N UNION ST STE 410	Amount				
City Stat	e Zip Code	7148.00			
ALEXANDRIA VA		SE24-0.042901 sement or Obligation			
Purpose of Expenditure SURVEY RESEARCH	Category/ Type 10	07 / 2014			
Name of Federal Candidate	Support Office Sought:	House District: 02			
WILLIAM STEVE SOUTHERLAND	Oppose President	Senate State: FL			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: 2014 Other (spec	Primary			
(a) SUBTOTAL of Itemized Independent Expenditures		14296.00			
(b) SUBTOTAL of Unitemized Independent Expenditures	······	7			
(c) TOTAL Independent Expenditures	······	4			
Under penalty of perjury I certify that the independent exwith, or at the request or suggestion of, any candidate or party committee) any political party committee or its agent.	authorized committee or agent of either, or (if the report				
Keith A. Davis	[Electronically Filed] Date 10 07	2014			
Signature					

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PAGE 15 OF 33 FOR SE OF FORM 24/48						
AME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C C00075820						
Check if 24-hour report X 48-hour re	port New repo	ort Amends repo	ort filed on			
Full Name of Payee NATIONAL MEDIA RESEARC	H PLANNING & PL	ACEMENT LLC	Date of Public Distribution/Dissemination 10 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 815 SLATERS LANE			Amount			
City ALEXANDRIA	State VA	Zip Code 22314	17389.73 Transaction ID : SE24-0.042757			
Purpose of Expenditure MEDIA		Category/ Type	Date of Disbursement or Obligation 10 06 2014			
Name of Federal Candidate						
JOE GARCIA		Support Oppose	Office Sought: House District: 26 President Senate State: FL			
Calendar Year-To-Date Per Election for Office Sought	15	29740.03	Disbursement For: Primary General 2014 General Other (specify) ▶			
Full Name of Payee NATIONAL MEDIA RESEARC	H PLANNING & PL	ACEMENT LLC	Date of Public Distribution/Dissemination 10 07 2014			
Mailing Address 815 SLATERS LANE			Amount			
City	State	Zip Code	213718.93			
ALEXANDRIA Purpose of Expenditure	VA	22314	Transaction ID : SE24-0.042694 Date of Disbursement or Obligation			
MEDIA		Category/ Type	10 / 03 / 2014			
Name of Federal Candidate		Support	Office Sought: House District: 12			
JOHN BARROW		X Oppose	President Senate State: GA			
Calendar Year-To-Date Per Election for Office Sought		1550211.12	Disbursement For: Primary General 2014 General Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Ex	openditures		231108.66			
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures			· · · · · · · · · · · · · · · · · · ·			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Keith A. Davis Signature	[Electron	ically Filed] Date	10 07 2014			

PAGE 16 OF 33 FOR SE OF FORM 24/48						
AME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C C00075820						
Check if 24-hour report X 48-hour report New report Amends report fi	M M / D D / Y Y Y Y Y					
Full Name of Payee FP1 STRATEGIES LLC	Date of Public Distribution/Dissemination 10 07 2014					
Mailing Address PO BOX 16504	Amount					
City State Zip Code	23780.00					
ALEXANDRIA VA 22302	Transaction ID : SE24-0.042892 Date of Disbursement or Obligation					
Purpose of Expenditure MEDIA Category/ Type	10 07 7 2014					
Name of Federal Candidate Support O	ffice Sought: X House District: 12					
JOHN BARROW Oppose	President Senate State: GA					
Calcilidat Ical 10 Date	isbursement For: Primary					
Full Name of Payee	Date of Public Distribution/Dissemination					
THE TARRANCE GROUP	10 07 / 2014					
Mailing Address 201 N UNION ST	Amount					
STE 410						
City State Zip Code ALEXANDRIA VA 22314	18960.00 Transaction ID : SE24-0.042902					
Purpose of Expenditure	Date of Disbursement or Obligation					
SURVEY RESEARCH Category/ Type	10 07 7 2014					
Name of Federal Candidate Support O	ffice Sought: X House District: 12					
JOHN BARROW Oppose	President Senate State: GA					
	isbursement For: Primary					
(a) SUBTOTAL of Itemized Independent Expenditures	42740.00					
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Keith A. Davis [Electronically Filed] Date	10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Signature						

PAGE 33 17 OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C00075820 X 48-hour report X New report 24-hour report Amends report filed on Check if Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC 2014 10 07 Mailing Address 815 SLATERS LANE Amount State Zip Code 128781.43 City VA 22314 Transaction ID: SE24-0.042681 **ALEXANDRIA** Date of Disbursement or Obligation Purpose of Expenditure Category/ **MEDIA** 10 03 2014 Type Name of Federal Candidate X House 03 Office Sought: District: Support STACI APPEL IΑ Oppose President Senate State: ✓ General Disbursement For: Primary Calendar Year-To-Date 1178843.86 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC 2014 Mailing Address 815 SLATERS LANE Amount City State Zip Code 158490.92 **ALEXANDRIA** VA 22314 Transaction ID: SE24-0.042683 Date of Disbursement or Obligation Purpose of Expenditure Category/ MEDIA 03 2014 10 Type Name of Federal Candidate 03 Support Office Sought: X House District: STACI APPEL IΑ Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 1178843.86 2014 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 287272.35 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Keith A. Davis [Electronically Filed] 10 07 2014 Date Signature

	meduic L)	FOR SE OF FORM 24/48				
	ME OF COMMITTEE (In Full) ATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼				
IN	ATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	C C00075820				
Ch	eck if 24-hour report X 48-hour report New report Amends report file	d on Mam / Dad / Yayayay				
	Full Name of Payee	Date of Public Distribution/Dissemination				
	MCCARTHY HENNINGS WHALEN, INC.	10 07 2014				
	Mailing Address 1850 M ST NW	Amount				
	STE 235					
	City State Zip Code WASHINGTON DC 20036-5837	20425.48 Transaction ID : SE24-0.042879 Date of Disbursement or Obligation				
	Purpose of Expenditure MEDIA Category/ Type	10 07 / 2014				
	Name of Federal Candidate Support Office	e Sought: House District:03				
	STACI APPEL Oppose	President Senate State: IA				
	Calendar Year-To-Date Disb	ursement For: Primary X General				
	Per Election for Office Sought 1178843.86 2014	Other (specify)				
	Full Name of Payee	Date of Public Distribution/Dissemination				
	AMY LEEDECKE	10 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	Mailing Address 110 D STREET SE	Amount				
	APT 515	4500.00				
	City State Zip Code WASHINGTON DC 20003	4500.00 Transaction ID : SE24-0.042924				
	Purpose of Expenditure	Date of Disbursement or Obligation				
	SURVEY RESEARCH Category/ Type	10 07 2014				
	Name of Federal Candidate Support Office	ee Sought: X House District: 03				
	STACI APPEL Oppose	President Senate State: IA				
	Calendar Year-To-Date Per Election for Office Sought Disk 201	oursement For: Primary General 4 Other (specify) ▶				
		Cuter (speerly)				
	(a) SUBTOTAL of Itemized Independent Expenditures					
	(b) SUBTOTAL of Unitemized Independent Expenditures					
	(c) TOTAL Independent Expenditures					
	(c) TOTAL macpendent Expenditures	7 7 7				
,	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
	[E1 - 4 11 - E1 - 11	.M / D.D / Y.Y.Y.Y				
	Signature [Electronically Filed] Date	10 07 2014				

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		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMM		FEC IDENTIFICATION NUMBER ▼
INATIONAL REPUBLICAN CONGRESSIONAL COMM	111166	C C00075820
Check if 24-hour report 48-hour report New report	Amends report filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEM	Date	te of Public Distribution/Dissemination
INATIONAL MEDIA RESEARCH FLAMMING & PLACEM	TILINI LLO	10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 815 SLATERS LANE	Am	ount
City State Zip Cod	le	89486.74
ALEXANDRIA VA 22314	Tra	insaction ID : SE24-0.042685 te of Disbursement or Obligation
Purpose of Expenditure Category		te of Disbursement of Obligation
	ype	10 03 2014
Name of Federal Candidate	Support Office Sou	ught: X House District: 10
BRADLEY S SCHNEIDER	C Oppose Pres	sident Senate State: IL
Calendar Year-To-Date	Disbursem	nent For: Primary X General
Per Election for Office Sought 445609.2	8 2014	Other (specify) ▶
Full Name of Payee	Dat	te of Public Distribution/Dissemination
IMGE		10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 603 KING ST	Am	nount
4TH FLR	Am	iount.
City State Zip Coo		307000.00
ALEXANDRIA VA 22314		nsaction ID : SE24-0.042775 te of Disbursement or Obligation
Purpose of Expenditure MEDIA Categor	ory/ ype	10 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office Sou	
BRADLEY S SCHNEIDER	Oppose Pres	
Calendar Year-To-Date Per Election for Office Sought 44560	Disbursem 2014	nent For: Primary X General
rei Election for Office Sought		Other (specify) -
(a) SUPTOTAL of Hamitad Independent Funes district		202102.71
(a) SUBTOTAL of Itemized Independent Expenditures	······	396486.74
(b) SUBTOTAL of Unitemized Independent Expenditures		
		- Agr. Agr. Agr.
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized committed party committee) any political party committee or its agent.		
Keith A. Davis	М	/ D D / Y Y Y Y Y
Signature [Electronically File	ed] Date 10	07 2014
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PAGE 20 OF 33 FOR SE OF FORM 24/48				
AME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C C00075820				
Check if 24-hour report X 48-ho	ur report New rep	oort Amends repo	ort filed on	
Full Name of Payee MCCARTHY HENNINGS	WHALEN, INC.		Date of Public Distribution/Dissemination	
Mailing Address 1850 M ST NW			Amount	
STE 235	State	Zip Code	25622.54	
WASHINGTON	DC	20036-5837	Transaction ID : SE24-0.042878 Date of Disbursement or Obligation	
Purpose of Expenditure MEDIA		Category/ Type	10 07 7 2014	
Name of Federal Candidate		Support	Office Sought: X House District: 10	
BRADLEY S SCHNEIDER		Oppose	President Senate State: IL	
Calendar Year-To-Date Per Election for Office Sought	,	445609.28	Disbursement For: Primary General 2014 Other (specify) ▶	
Full Name of Payee			Date of Public Distribution/Dissemination	
THE TARRANCE GROUP			10 07 7 2014	
Mailing Address 201 N UNION ST			Amount	
STE 410	Chaha	Zin Onda	24000.00	
City ALEXANDRIA	State VA	Zip Code 22314	21000.00 Transaction ID : SE24-0.042903 Date of Disbursement or Obligation	
Purpose of Expenditure SURVEY RESEARCH		Category/ Type	10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate		Support	Office Sought:	
BRADLEY S SCHNEIDER		Oppose	President Senate State: IL	
Calendar Year-To-Date Per Election for Office Sought		445609.28	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independe	nt Expenditures		. • 46622.54	
(b) SUBTOTAL of Unitemized Indepen	dent Expenditures		. •	
(c) TOTAL Independent Expenditures.			•	
	f, any candidate or authorized		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political	
Keith A. Davis Signature	[Electron	nically Filed] Date	10 07 7 2014	
Oignaturo				

Signature

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4/48 HOUR REPORT OF INDEPENDENT EXPENDITURES	DACE 24 OF 33			
Schedule E)	PAGE 21 OF 33 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	C C00075820			
Check if 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y			
Full Name of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC	ate of Public Distribution/Dissemination			
Mailing Address 815 SLATERS LANE	mount			
City State Zip Code	87206.79			
Da	ransaction ID : SE24-0.042691 ate of Disbursement or Obligation			
Purpose of Expenditure MEDIA Category/ Type	10 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate Support Office So	ought: X House District: 12			
MIKE J BOST	esident Senate State: IL			
Calendar Year-To-Date Per Election for Office Sought Disburser 2014	ment For: Primary			
NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC Mailing Address 815 SLATERS LANE	pate of Public Distribution/Dissemination M 10			
City State Zip Code	261620.36			
Da	ansaction ID : SE24-0.042692 Date of Disbursement or Obligation			
Purpose of Expenditure MEDIA Category/ Type	M 10			
Name of Federal Candidate Support Office Sc	ought: House District: 12			
WILLIAM L ENYART JR Oppose Pre	resident Senate State: IL			
Calendar Year-To-Date Per Election for Office Sought Disburses 2014	ement For: Primary X General Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures				
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Keith A. Davis [Electronically Filed] Date 10	07 2014			

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NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL (FEC IDENTIFICATION NUMBER ▼	
	C C00075820	
Check if 24-hour report X 48-hour report New report	port Amends report filed	d on M = M / D = D / Y = Y = Y
Full Name of Payee IMGE		Date of Public Distribution/Dissemination
		10 07 7 2014
Mailing Address 603 KING ST 4TH FLR		Amount
City State	Zip Code	49500.00
ALEXANDRIA VA	22314	Transaction ID : SE24-0.042776 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA	Category/ Type	10 / 06 / 2014
Name of Federal Candidate	Support Office	e Sought: X House District: 12
WILLIAM L ENYART JR	X Oppose	President Senate State: IL
Calendar Year-To-Date Per Election for Office Sought	Disbo 1771636.27 2014	oursement For: Primary General Other (specify) ▶
Full Name of Payee IMGE	1	Date of Public Distribution/Dissemination
Mallana Address		10 07 2014
Mailing Address 603 KING ST 4TH FLR		Amount
City State	Zip Code	16500.00
ALEXANDRIA VA	22314	Transaction ID : SE24-0.042781 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA	Category/ Type	10 / 06 / 2014
Name of Federal Candidate	Support Office	ce Sought: House District: 12
MIKE J BOST		President Senate State: IL
Calendar Year-To-Date Per Election for Office Sought	1771636.27 Disb 2014	oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		66000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	—	7 7 7
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
Keith A. Davis [Electro.	nically Filed] Date	10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

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FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C00075820 X 48-hour report New report Check if 24-hour report Amends report filed on Full Name of Payee Date of Public Distribution/Dissemination DMM MEDIA INC 2014 10 07 Mailing Address 1911 N FORT MYER DR Amount STF 400 State Zip Code 14513.62 City VA 22209 Transaction ID: SE24-0.042871 **ARLINGTON** Date of Disbursement or Obligation Purpose of Expenditure Category/ **MEDIA** 10 07 2014 Type Name of Federal Candidate X House 12 Office Sought: District: Support WILLIAM L ENYART JR IL Oppose President Senate State: ✓ General Disbursement For: Primary Calendar Year-To-Date 1771636.27 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination DMM MEDIA INC 2014 Mailing Address 1911 N FORT MYER DR Amount **STE 400** 4837.88 City State Zip Code **ARLINGTON** VA 22209 Transaction ID: SE24-0.042872 Date of Disbursement or Obligation Purpose of Expenditure Category/ MEDIA 07 2014 10 Type Name of Federal Candidate 12 X Support Office Sought: X House District: MIKE J BOST IL Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 1771636.27 2014 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 19351.50 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Keith A. Davis [Electronically Filed] 10 07 2014 Date Signature

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	modulo L)	FOR SE OF FORM 24/48			
	ME OF COMMITTEE (In Full) ATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼			
I N	A HONAL INLEGISIONAL CONSINT TEE	C C00075820			
Che	eck if 24-hour report X 48-hour report New report Amends report filed	on Man / Dab / Yayayay			
	Full Name of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC	Date of Public Distribution/Dissemination			
	NATIONAL WEDIA RESEARCH FLANNING & FLACEMENT LEC	10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	Mailing Address 815 SLATERS LANE	Amount			
ŀ	City State Zip Code	283470.99			
	ALEXANDRIA VA 22314	Transaction ID : SE24-0.042693 Date of Disbursement or Obligation			
	Purpose of Expenditure MEDIA Category/ Type	10 03 2014			
ŀ	Name of Federal Candidate Support Office	e Sought: X House District: 02			
	EMILY CAIN Support Office Oppose	President Senate State: ME			
		ursement For: Primary X General			
	Per Election for Office Sought 845495.54 2014				
ľ	Full Name of Payee	Date of Public Distribution/Dissemination			
	FP1 STRATEGIES LLC	10 07 2014			
	Mailing Address PO BOX 16504	Amount			
	City State Zip Code	24170.00			
	ALEXANDRIA VA 22302	Transaction ID : SE24-0.042886 Date of Disbursement or Obligation			
ľ	Purpose of Expenditure MEDIA Category/	M M / D D / Y Y Y Y			
	Type	10 07 2014			
	Name of Federal Candidate Support Office	e Sought: X House District: 02			
	EMILY CAIN Oppose	President Senate State: ME			
	201/05 F4	ursement For: Primary X General			
	Per Election for Office Sought 845495.54	Other (specify) ▶			
((a) SUBTOTAL of Itemized Independent Expenditures	307640.99			
	(b) SUBTOTAL of Unitemized Independent Expenditures				
,	,-,	7 7			
((c) TOTAL Independent Expenditures	4 4			
١	Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.				
	Keith A. Davis	M / D D / Y Y Y Y			
	Signature [Electronically Filed] Date	0 07 2014			

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FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C00075820 X New report 24-hour report X 48-hour report Amends report filed on Check if Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC 2014 10 07 Mailing Address 815 SLATERS LANE Amount State Zip Code 527600.61 City VA 22314 Transaction ID: SE24-0.042686 **ALEXANDRIA** Date of Disbursement or Obligation Purpose of Expenditure Category/ **MEDIA** 10 03 2014 Type Name of Federal Candidate X House 07 District: Office Sought: Support **COLLIN C PETERSON** MN Oppose President Senate State: Disbursement For: Primary X General Calendar Year-To-Date 2074335.91 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC 2014 Mailing Address 815 SLATERS LANE Amount City State Zip Code 100577.02 **ALEXANDRIA** VA Transaction ID: SE24-0.042756 22314 Date of Disbursement or Obligation Purpose of Expenditure Category/ MEDIA 2014 10 06 Type Name of Federal Candidate 07 Support Office Sought: X House District: **COLLIN C PETERSON** MN Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 2074335.91 2014 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 628177.63 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Keith A. Davis [Electronically Filed] 10 07 2014 Date Signature

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Schedule E)	FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00075820				
Check if 24-hour report X 48-hour report New report Amends	report filed on / / /				
Full Name of Payee ONMESSAGE INC	Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 705 MELVIN DR	Amount				
STE 105					
City State Zip Code ANNAPOLIS MD 21401	19220.00 Transaction ID : SE24-0.042882 Date of Disbursement or Obligation				
Purpose of Expenditure MEDIA Category/ Type	10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Federal Candidate Suppo	ort Office Sought: X House District: 07				
COLLIN C PETERSON Oppos	Senate State: MN				
Calendar Year-To-Date Per Election for Office Sought 2074335.91	Disbursement For: Primary				
Full Name of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT L Mailing Address 815 SLATERS LANE	Date of Public Distribution/Dissemination 10 07 7 2014 Amount				
City State Zip Code	461772.38				
ALEXANDRIA VA 22314	Transaction ID : SE24-0.042697 Date of Disbursement or Obligation				
Purpose of Expenditure MEDIA Category/ Type	10 03 7 2014				
Name of Federal Candidate Support	ort Office Sought: X House District: 08				
RICHARD M NOLAN Oppos	Se President Senate State: MN				
Calendar Year-To-Date Per Election for Office Sought 1740611.41	Disbursement For: Primary General 2014 Gther (specify) ▶				
(a) SUBTOTAL of Itemized Independent Expenditures					
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Keith A. Davis [Electronically Filed] Signature	Date 10 07 2014				
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FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C00075820 X 48-hour report New report 24-hour report Amends report filed on Check if Full Name of Payee Date of Public Distribution/Dissemination **IMGE** 2014 10 07 Mailing Address 603 KING ST Amount 4TH FLR State Zip Code 138400.00 City VA 22314 Transaction ID: SE24-0.042782 **ALEXANDRIA** Date of Disbursement or Obligation Purpose of Expenditure Category/ **MEDIA** 10 06 2014 Type Name of Federal Candidate X House 80 Office Sought: District: Support RICHARD M NOLAN MN Oppose President Senate State: ✓ General Disbursement For: Primary Calendar Year-To-Date 1740611.41 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination **BRABENDER COX** 2014 Mailing Address 1218 GRANDVIEW AVE Amount City State Zip Code 19294.00 **PITTSBURGH** PΑ Transaction ID: SE24-0.042884 15211 Date of Disbursement or Obligation Purpose of Expenditure Category/ MEDIA 07 2014 10 Type Name of Federal Candidate 08 Support Office Sought: X House District: RICHARD M NOLAN MN Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 1740611.41 2014 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 157694.00 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Keith A. Davis [Electronically Filed] 10 07 2014 Date Signature

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NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE FEC IDENTIFICATION NUMBER ▼				
C C00075820				
Check if 24-hour report X 48-hour rep	ort New rep	ort Amends repo	ort filed on M M / D D / Y Y Y Y Y	
Full Name of Payee BASSWOOD RESEARCH			Date of Public Distribution/Dissemination	
			10 7 2014	
Mailing Address 4550 MONTGOMERY AVE STE 906			Amount	
City	State	Zip Code	15089.00	
BETHESDA	MD	20814	Transaction ID : SE24-0.042895 Date of Disbursement or Obligation	
Purpose of Expenditure SURVEY RESEARCH		Category/ Type	10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate		Support	Office Sought: House District: 08	
RICHARD M NOLAN		X Oppose	President Senate State: MN	
Calendar Year-To-Date Per Election for Office Sought	17	740611.41	Disbursement For: Primary General	
Tel Election for Office Sought	<u> </u>		Other (specify)	
Full Name of Payee NATIONAL MEDIA RESEARCH Mailing Address 815 SLATERS LANE	I PLANNING & PL	ACEMENT LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
OTO OE WEIGHT			Amount	
City	State	Zip Code	228962.84	
ALEXANDRIA	VA	22314	Transaction ID: SE24-0.042698 Date of Disbursement or Obligation	
Purpose of Expenditure MEDIA		Category/ Type	10 03 / Y 2014	
Name of Federal Candidate		Support	Office Sought:	
TIMOTHY BISHOP		X Oppose	President Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought		1619487.64	Disbursement For: Primary General 2014 Other (opening)	
	, ,		Other (specify) -	
(a) SUBTOTAL of Itemized Independent Exp	penditures		▶ 244051.84	
(b) SUBTOTAL of Unitemized Independent E	Expenditures		. •	
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Keith A. Davis	[Electron	ically Filed] Date	M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature		_ Date	2017	

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AME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C C00075820				
Check if 24-hour report 48-hour report New report Amends report filed	on Man / Dad / Yayayay			
Full Name of Payee DMM MEDIA INC	Date of Public Distribution/Dissemination			
Mailing Address 1911 N FORT MYER DR STE 400	10 07 2014 Amount			
City State Zip Code	22318.25			
ARLINGTON VA 22209 Purpose of Expenditure MEDIA Category/	Transaction ID : SE24-0.042873 Date of Disbursement or Obligation			
News of Federal Constitute	10 07 2014 e Sought: X House District: 01			
TIMOTHY BISHOP Oppose	President Senate State: NY			
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For: Primary X General Other (specify) ▶			
Full Name of Payee GS STRATEGY GROUP	Date of Public Distribution/Dissemination			
Mailing Address 350 N 9TH ST SUITE 550	Amount			
City State Zip Code BOISE ID 83702	15000.00 Transaction ID : SE24-0.042898			
Purpose of Expenditure SURVEY RESEARCH Category/ Type	Date of Disbursement or Obligation 10 07 2014			
Name of Federal Candidate Support TIMOTHY BISHOP Oppose	e Sought: House District: 01 President Senate State: NY			
	ursement For: Primary X General Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures	37318.25			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.				
Keith A. Davis [Electronically Filed] Date	07 / 2014			

Schedule E)	LI LIIDLIII EXI LIID	ITOTILO	PAGE 30 OF 33 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE FEC IDENTIFICATION NUMBER ▼				
WITHOUT REF OBEIONIA	C C00075820			
Check if 24-hour report X 48-ho	our report New rep	ort Amends repo	ort filed on	
Full Name of Payee NATIONAL MEDIA RESEA	RCH PLANNING & PL	ACEMENT LLC	Date of Public Distribution/Dissemination	
Mailing Address 815 SLATERS LANI	<u> </u>		Amount	
City	State	Zip Code	162775.01	
ALEXANDRIA	VA	22314	Transaction ID : SE24-0.042677 Date of Disbursement or Obligation	
Purpose of Expenditure MEDIA		Category/ Type	10 03 / Y Y Y Y Y	
Name of Federal Candidate		Support	Office Sought: X House District: 19	
SEAN ELDRIDGE		Oppose	President Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought	,	506107.62	Disbursement For: Primary General 2014 Other (specify) ▶	
Full Name of Payee			Date of Public Distribution/Dissemination	
MCLAUGHLIN AND ASSO	CIATES INC		10 07 2014	
Mailing Address 566 S RT 303			Amount	
City	State	Zip Code	15000.00	
BLAUVELT	NY	10913	Transaction ID : SE24-0.042896 Date of Disbursement or Obligation	
Purpose of Expenditure SURVEY RESEARCH		Category/ Type	10 07 2014	
Name of Federal Candidate		Support	Office Sought:	
SEAN ELDRIDGE		Oppose	President Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	506107.62	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent	ent Expenditures		. • 177775.01	
(b) SUBTOTAL of Unitemized Indepen	ndent Expenditures			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Keith A. Davis	[Electron	ically Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature	-	Date		

PAGE 33 OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C00075820 X New report 24-hour report X 48-hour report Amends report filed on Check if Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC 2014 10 07 Mailing Address 815 SLATERS LANE Amount State Zip Code 112040.67 City VA 22314 Transaction ID: SE24-0.042699 **ALEXANDRIA** Date of Disbursement or Obligation Purpose of Expenditure Category/ **MEDIA** 10 03 2014 Type Name of Federal Candidate X House 21 Office Sought: District: Support **AARON WOOLF** NY Oppose President Senate State: Disbursement For: Primary X General Calendar Year-To-Date 544576.98 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC 2014 Mailing Address 815 SLATERS LANE Amount City State Zip Code 302571.82 **ALEXANDRIA** VA Transaction ID: SE24-0.042696 22314 Date of Disbursement or Obligation Purpose of Expenditure Category/ MEDIA 03 2014 10 Type Name of Federal Candidate 10 Support Office Sought: X House District: JOHN FOUST VA Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 1216965.41 2014 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 414612.49 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Keith A. Davis [Electronically Filed] 10 07 2014 Date Signature

PAGE 33 32 OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C00075820 X New report 24-hour report X 48-hour report Amends report filed on Check if Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC 2014 10 07 Mailing Address 815 SLATERS LANE Amount State Zip Code 302571.81 City VA 22314 Transaction ID: SE24-0.042700 **ALEXANDRIA** Date of Disbursement or Obligation Purpose of Expenditure Category/ **MEDIA** 10 03 2014 Type Name of Federal Candidate X House 10 X Support Office Sought: District: **BARBARA J COMSTOCK** ۷A Oppose President Senate State: Disbursement For: Primary X General Calendar Year-To-Date 1216965.41 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC 2014 Mailing Address 815 SLATERS LANE Amount City State Zip Code 237287.88 **ALEXANDRIA** VA Transaction ID: SE24-0.042687 22314 Date of Disbursement or Obligation Purpose of Expenditure Category/ MEDIA 03 2014 10 Type Name of Federal Candidate 03 Support Office Sought: X House District: NICK J RAHALL II WV Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 1637177.65 2014 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 539859.69 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Keith A. Davis [Electronically Filed] 10 07 2014 Date Signature

33 PAGE 33 OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE C00075820 X 48-hour report X New report Check if 24-hour report Amends report filed on Full Name of Payee Date of Public Distribution/Dissemination FP1 STRATEGIES LLC 2014 10 07 Mailing Address PO BOX 16504 Amount State Zip Code 23665.00 City Transaction ID: SE24-0.042889 VA 22302 **ALEXANDRIA** Date of Disbursement or Obligation Purpose of Expenditure Category/ **MEDIA** 10 07 2014 Type Name of Federal Candidate 03 Office Sought: X House District: Support NICK J RAHALL II WV Oppose President Senate State: ✓ General Disbursement For: Primary Calendar Year-To-Date 1637177.65 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Mailing Address Amount City State Zip Code Date of Disbursement or Obligation Purpose of Expenditure Category/ Type Name of Federal Candidate Support Office Sought: House District: Oppose President Senate State: Disbursement For: Primary General Calendar Year-To-Date Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 23665.00 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... 7897953.46 Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Keith A. Davis [Electronically Filed] 10 07 2014 Date Signature